

Supporting People Three Year Draft Strategic Plan and Covid19 Recovery Plan

Response from the Commissioner for Older People for
Northern Ireland

April 2022

F.A.O Policy, Strategy and Communications Team
Supporting People
2nd Floor
2 Adelaide Street,
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RE: Consultation Response - Supporting People Three Year Draft Strategic Plan and Covid 19 Recovery Plan

Dear Sir / Madam

I am writing on behalf of the Commissioner for Older People for Northern Ireland (COPNI). The Commissioner for Older People is an independent voice and champion for older people whose legal powers and duties are defined by the Commissioner for Older People (Northern Ireland) Act 2011. This is a statutory role, at arms-length of government, which takes an active role in safeguarding and promoting the interests of older people in Northern Ireland.

COPNI welcomes the opportunity to engage with this consultation on the Northern Ireland Housing Executive's (NIHE) Supporting People Three Year Draft Strategic Plan and Covid 19 Recovery Plan. COPNI welcomes this plan and is encouraged by its ambition to improve services provided by the Supporting People Programme (SPP). Upon reviewing the strategy there are number of issues that COPNI would like to highlight and provide comment on. These are summarised below.

An Ageing Population:

The SPP will be of increasing future importance given that NI has an increasingly ageing population profile. According to the most recent projections by the NI Statistical Research Agency (NISRA), in 2022 the mid-year population of people aged 60 and over in Northern Ireland is estimated to be 447,773, an increase of 18,000 people from 2020 (4.38%). The same projections show that by 2041 this figure will increase to 584,615, meaning that just over 30% of the total projected population (1,937,876) will be aged over 60¹.

Health and later life:

The importance of the SPP is also evident given the greater prevalence of health conditions and disability among older people. A 2020 report by Public Health Ireland found that in Northern Ireland, for persons over 65, 44% of people were living with a disability or health-related limitations in activity and for those over 75, this figure increases to 57%².

Objective 1: Drive recovery from Covid-19, prevent lasting adverse impacts from the pandemic, and positively reform services by targeting services towards those in need (p17)³.

COPNI welcomes this objective however, COPNI would welcome more specific detail into how some of the goals entailed in the objective will be met.

1. <https://www.nisra.gov.uk/publications/2020-based-interim-population-projections-northern-ireland>

2. <https://publichealth.ie/wp-content/uploads/2020/04/20200416-AGEING-PUBLIC-HEALTH-MAIN.pdf> (p18).

3. <https://www.nihe.gov.uk/Documents/Consultation-Draft-Supporting-People-Strategy/Supporting-People-Draft-Strategic-Plan-COVID-19-Re.aspx>

Covid Recovery – The strategy advises that recovery will be addressed by asking third party organisations to submit proposals on how this will be met. The strategy does not detail the requirements or work needed to address issues in relation to covid recovery or the specific criteria that these proposals will have to meet in relation to older people and other vulnerable groups with additional needs.

As recognised by NIHE, the impact of Covid-19 on older persons has been much more significant, on their mental and physical health and it has also compounded the already existing problem of loneliness and social isolation (LSI). A survey carried out by Understanding Society, found that prior to Covid-19, 8.5% of people in the UK stated that they were often or always lonely, a subsequent study collected between 21st March and 10th May 2020 found this had increased to 18.5%⁴.

A 2020 report by the Northern Ireland Campaign to End Loneliness found that:

- 65% of people in Northern Ireland describe their general health as ‘bad’ or ‘very bad’ feel ‘more often lonely’.
- There was a 50% greater use of emergency care in those living alone.
- 41% of people aged over 75 feel ‘more often lonely’⁵.

According to the most recent data from NISRA, 96.5% of all deaths from Covid-19 were among those over aged over 60 and 89.2% of all deaths were those aged over 70⁶.

Reconfigurations and service development to release funds from accommodation-based services to fund additional floating support accommodation-based services to fund additional floating support places.

COPNI welcomes an increase in floating support where needed, but is concerned that this may result in a reduction of in more long-term accommodation-based services. There is also a concern that floating support may be applied in circumstances where more long-term support is required due budgetary constraints. A 2012 analysis carried out by RS McClure on behalf of NIHE did acknowledge the cost benefits of the floating support

approach but gave clear evidence based on their research that this model, while suitable for some clients was not suitable for many older more vulnerable clients⁷.

COPNI would seek assurances that there will a continued commitment to providing longer term accommodation-based services for older and vulnerable services users where needed and that these will be substituted by floating support.

Major Adverse Incidents (MIAs). - The strategy advises that it will aim to reduce the amount of reported MIA's, but no details are provided on how these will be addressed. COPNI also notes that no definition of MIA's is provided in the strategy, or in NIHE most recent SPP annual report. According to the most recent SPP Annual Report from 2019 to 2021 there was a 17% increase in MIA's among older service users⁸. COPNI would like NIHE to provide a detailed definition of which incidents are classified as MIAs as part of any further work on the strategy and provide a more detailed plan on how it aims to reduce these.

Objective 2 - Work towards closing the 14% gap between need and supply, this will be underpinned by evidence from the Strategic Needs Assessment (SNA), prioritising services for older people; People with Mental health issues; Single homeless people with alcohol and drug problems; and women at risk of domestic abuse.

COPNI is concerned about the level of the current gap and the projected increase of between 22% - 30% over a 3-year period, and the 10-year projected increase of between 31% - 43% and its potential impact on older service users.

4. <https://whatworkswellbeing.org/wp-content/uploads/2020/08/COVID-LONELINESS-2020.pdf>

5. <https://www.campaigntoendloneliness.org/wp-content/uploads/Loneliness-in-Northern-Ireland-A-Call-to-action.pdf>

6. <https://www.nisra.gov.uk/sites/nisra.gov.uk/files/publications/Covid%20by%20S75%20provisional%20report%20-%20updated%207%20feb.pdf>

7. https://www.nihe.gov.uk/getmedia/dbb82ed8-631d-4aa3-ad40-0aaa8a9f8a1b/effectiveness_of_floating_support_-_final_report_december_2012.pdf.aspx

8. <https://www.nihe.gov.uk/Documents/Supporting-People-consultation/Supporting-People-Annual-Report>

9. <https://www.health-ni.gov.uk/sites/default/files/consultations/health/doh-rasc-consultation-document.pdf>

As with objective 1, the SPP strategy has put forward the proposal of third-party providers proposing solutions to these issues, including the proposal to increase floating support to meet these gaps. COPNI would like assurances that this will not be at the expense of those service users, including older users who have more complex needs and require long-term support to live independently. COPNI would also encourage more detail on the terms of reference given to third-party providers for business proposals to address these issues.

Objective 3 - Work with Supporting People providers, to invest in service innovation to achieve greater value for money and better outcomes for service users.

COPNI supports the ethos of this objective. However, as with the proceeding objectives, COPNI would ask that greater detail to be provided on how the stated efficiencies and innovations will be achieved and that the proposed frameworks be completed and provided to relevant stakeholders for consultation and review.

Objective 4 - Strengthen relationships across health, criminal justice and housing to achieve greater collaboration and sharing of risk with the aim of generating greater value from public funds to enhance available resources for housing support. This will ultimately achieve better outcomes for services users.

COPNI supports this objective and recognises that greater cooperation across relevant bodies and stakeholders will add value to and help improve the outworking's of the SPP. As with the other objectives, we would encourage NIHE to provide more detail on how this will be achieved, what will be involved in the proposed pilot projects between health, housing, social care and justice organisations and also a more detailed framework be produced on measuring the effectiveness of these projects.

COPNI specifically supports and encourages the NIHE to engage with the current and ongoing work by the Department of Health (DoH) on the Reform of Adult Social Care. One of the key objectives relates to the "Primacy of Home". These objectives are:

- To support people who require adult social care services to live in a home of their choosing where possible.
- To reduce the necessity for people to move from a home of their choosing to another home to access the care and support they need.
- Support people to live well independently in their own homes, retaining connection to their families, social networks and communities Support people to have choice and control of their daily living arrangements and how care and support in their home is provided.
- Support family carers to continue to provide care in the home environment⁹.

The consultation document also proposes that the Department of Health and the HSC work more closely with the Department for Communities and NIHE around future strategies for specialist and supported housing to ensure more effective alignment between housing and social care. COPNI welcomes and supports this joined up and planned approach to future service provision, which is needed to ensure improved and better services for our older people.

COPNI would welcome the opportunity to engage further on the development of this strategy and looks forward to the NIHE's response to the consultation.

If you wish to discuss this response or the strategy further, I can be contacted on the details below.

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Yours sincerely

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